

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|----------|
| FEE DETERMINATION | S. C. | | 07-13-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | A&m | 1081 | 812410 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date | Claim | Final | Original | Date | Claim | Final | Original | Date |
|-------|-------|----------|---------|-------|-------|----------|------|-------|-------|----------|------|
| 1 | ✓ | 1 | 9/30/01 | 51 | | | | 101 | | | |
| 2 | ✓ | 2 | 2/21/02 | 52 | | | | 102 | | | |
| 3 | ✓ | 0 | 9/30/02 | 53 | | | | 103 | | | |
| 4 | ✓ | 0 | | 54 | | | | 104 | | | |
| 5 | | | | 55 | | | | 105 | | | |
| 6 | ✓ | ✓ | | 56 | | | | 106 | | | |
| 7 | | | | 57 | | | | 107 | | | |
| 8 | ✓ | ✓ | | 58 | | | | 108 | | | |
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| 10 | ✓ | ✓ | | 60 | | | | 110 | | | |
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| 50 | | | | 100 | | | | | | | |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)